VERIFICATION OF CALIBRATION REPORT

of Datamaster cdm State of Alaska

FEB 20 2010

Scientific Crime Detection Laboratory - Statewide R

	Scientific Crime Detection Laboratory - Statewide Breath Alcohol Program	120
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	Datamaster cdm S/N /3638	2.1
Super	Name Michael A. Weg ID# 3590 Date 2-23-1	^ -
	Name Michael A. Weg 10# 3570 Date 2-23-1	
A	Agency AST Phone # 451-285	0
	Instrument Location Healy	
	Alco S/N X 173355 Target Value 1082 High Pressure 250	
B	Alco Test Value Average .076	
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egy on a good kooking over objective	Signature Michael C. Coy	0
	and the second s	NO
	(OVER)	110
	(Do Not write in the area below)	111
J. Bolz, a	after being first duly sworn, depose and state as follows. psic Scientist IV at the State of Alaska Scientific Crime Detection Laboratory.	
n a Foren	nsic Scientist IV at the State of Alaska Scientific Crime Detection Laboratory. Scientific Crime Detection Laboratory is an entity within the Department of Public Safety.	
e Alaska	ientific Director of the State Breath Alcohol Program.	
m the Scie	ientific Director of the State Breath Alcohol Program. acity, I am responsible for overseeing the breath alcohol program, including assuring that persons acity, I am responsible for overseeing the breath alcohol program, including assuring that persons acity, I am responsible for overseeing the breath alcohol program, including assuring that persons acity, I am responsible for overseeing the breath alcohol program, including assuring that persons acity, I am responsible for overseeing the breath alcohol program, including assuring that persons acity, I am responsible for overseeing the breath alcohol program, including assuring that persons acity, I am responsible for overseeing the breath alcohol program, including assuring that persons acity, I am responsible for overseeing the breath alcohol program, including assuring that persons acity, I am responsible for overseeing the breath alcohol program, including assuring that persons acity, I am responsible for overseeing the breath alcohol program, including assuring that persons acity, I am responsible for overseeing the breath alcohol program.	
nsible for	acity, I am responsible for overseeing the breath alcohol program, including a consistency of the calibration of instruments are properly trained and qualified. I also am responsible for verifying the calibration of instruments are properly trained and qualified.	
taining the	e records of the program.	
he attached	e records of the program. ed verification is a true and accurate verification of calibration that reflects a regularly conducted and ed verification is a true and accurate verification of calibration that reflects a regularly conduct the reded activity of the breath alcohol program performed by a person trained and qualified to conduct the	
arly record	ded activity of the breath alcohol program performed by a person	
cation.	nced instrument is certified for evidentiary use in the State of Alaska.	
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ita J. Bolz		
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tate Breath	h Alcohol Program	A. L.

(Notary Seal Stamp)

Carolyn M. Noland Notary Public, State of Alaska Commission Expires with Office



